

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**In re Application of
STEPHEN F. GASS and J. DAVID FULMER****Date: April 1, 2004****Serial No.: 10/050,085****Examiner Boyer D. Ashley****Filed: January 14, 2002****Group Art Unit 3724****For: MITER SAW WITH IMPROVED SAFETY SYSTEM****RECEIVED
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To: Commissioner for Patents
Attention: Examiner Boyer D. Ashley
Group Art Unit 3724
P.O. Box 1450
Alexandria, Virginia 22313-1450

APR - 1 2004**OFFICIAL****FIRST AMENDMENT**

This amendment responds to the Office Action mailed January 14, 2004. Please amend the claims as set forth on the following pages 2-5. Applicant's remarks begin on page 6.

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PTO/SB/21 (02-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM		Application Number 10/060/085
		Filing Date January 14 2002
		First Named Inventor Stephen F. Goss
		Art Unit 3724
		Examiner Name Boyer D. Ashley
Total Number of Pages in This Submission 18		Attorney Docket Number SDT 323

ENCLOSURES (Check all that apply)

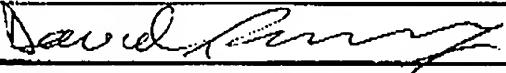
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David Fanning, Esq., Reg. No. 33,233 SD3, LLC
Signature	
Date	April 1, 2004

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Date: April 1, 2004



David A. Fanning